

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	WM	864	2/13 03-01-01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
Final	4/1
Original	3/24
1 1	V
2 2	V
3 3	V
4 4	V
5 5	V
6 6	V
7 7	V
8 8	V
9 9	V
10 10	V
11 11	V
12 12	V
13 13	V
14 14	V
15 15	V
16 16	V
17 17	V
18 18	V
19 19	V
20 20	V
21 21	V
22 22	V
23 23	V
24 24	V
25 25	V
26 26	V
27 27	V
28 28	V
29 29	V
30 30	V
31 31	V
32 32	V
33 33	V
34 34	V
35 35	V
36 36	V
37 37	V
38 38	V
39 39	V
40 40	V
41 41	V
42 42	V
43 43	V
44 44	V
45 45	V
46 46	V
47 47	V
48 48	V
49 49	V
50 50	V

Claim	Date
Final	4/1 25
Original	3/24
51 51	V
52 52	V
53 53	V
54 54	V
55 55	V
56 56	V
57 57	V
58 58	V
59 59	V
60 60	V
61 61	V
62 62	V
63 63	V
64 64	V
65 65	V
66 66	V
67 67	V
68 68	V
69 69	V
70 70	V
71 71	V
72 72	V
73 73	V
74 74	V
75 75	V
76 76	V
77 77	V
78 78	V
79 79	V
80 80	V
81 81	V
82 82	V
83 83	V
84 84	V
85 85	V
86 86	V
87 87	V
88 88	V
89 89	V
90 90	V
91 91	V
92 92	V
93 93	V
94 94	V
95 95	V
96 96	V
97 97	V
98 98	V
99 99	V
100 100	V

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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